

OMB No 1545-0047 2016

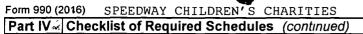
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

	4		Under sec	tion 501(c), 52	27, or 4947(a)(1) of	the Internal Re	evenue Code (e	except p	rivate found	dations)	<u> </u>			—;ŏ
Interr	nal Reven	f the Treasury nue Service	 Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990. 									Open to Inspe		4 9
<u>A</u>	For the	e 2016 calenda	r year, or tax y				, 2016, and		g Sep			, 2017		.
В	Check if	applicable	Name of organization	ation SPEE	DWAY CHILE	DREN'S	CHARITIES	s		D Employ	er identi	fication num	nber	_ ö
	Add	dress change	Doing business a	S	•					56-1331429				
	Nan	me change	Number and stre	et (or PO box if	mail is not delivered t	o street address	s)	Room/s	suite	E Telepho	ne numb	er		ഗ
	Initi	ial return P	о вох 187	47						(70				<u> </u>
	\vdash	il return/terminated			ountry, and ZIP or fore	gn postal code		<u> </u>		 				<u>_</u>
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	H	<u> </u>	HARLOTTE	as of proposal of	france		NC 28	3218	H(a) le this s	a group return				い。 (No C
	[Toppication perioding [* * *******************************											L	-	_
						narlotte			If 'No,'	subordinates attach a list (included see instri	uctions)	Yes	JNo C
<u></u>	Tax-e	exempt status	X 501(c)(3)	501(c) () ▼ (insert n	0) 494	7(a)(1) or ソノ	52.7						
J	Web	site: > spe	edwaychar	ities.o	rg		<u> </u>		H(c) Group	exemption nu	mber 🕨	<u> </u>		
K	Form	of organization	X Corporation	Trust	Association Oth	ner 🏲	L Year o	of formation	on 198	2 M s	itate of le	gal domicile	NC	
Pa	rt I	Summary					ļ							
			the organizatio	n's mission	or most significar	nt activities	Spee	dwav	Chil	dren's				
a.					purpose i	_ 								
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Governance					discontinued its of			more t	 han 25% (of its net a				
යි					g body (Part VI, I						3			15
∘ಶ			•	_	the governing be	•					4			15
ies					lendar year 2016	•					5			0
Activities	1				essary)	•	•				6		2 1	500
Z Z			,		t VIII, column (C)						7a		61	0.
3	l				n Form 990-T, lir						7b			0.
}— }		7.0. 0 0.0.0 0	domodo tanabio		11 01111 000 17, 111					rior Year		Curr	ent Year	
)	8	Contributions a	ad grante (Part	\/ line 1h\		REC	EIVED	1			102			2.1
ne		_	/ <u>-</u> .						ˈ -	3,867,7	03.	4,	064,33	<u> </u>
Revenue	10	Investment ince	mo (Dart VIII a	viii, iiile 29) · · · · · :5: - ines 3, 4, and 7d			. S	' 		12.6	<u> </u>		11.
æ	11	Other revenue	Der VIII.	olullili (A), i	5, 6d, 8c, 9c, 10d) : [-EB-(2018	191	·		26.			
_								181	·	-159,6			214,1	
					ust equal Part VI			<u>~: ==; </u>		3,707,8			850,14	
	1				column (A), lines		<u> </u>	٠ نــــــــــــــــــــــــــــــــــــ		2,766,7	89.	3,	131,4	<u>67.</u>
	l	•			olumn (A), line 4)				<u> </u>					
s	15	Salaries, other	compensation,	employee be	enefits (Part IX, c	olumn (A), l	ines 5-10) ·		·					
Expenses	16 a	Professional fur	ndraising fees (Part IX, colu	mn (A), line 11e)				.					
<u>B</u>	h.	Total fundraisin	a expenses (Pa	art IX colum	n (D), line 25) ►		674,	110	Ţ.	*,	14.2			
Щ	1		=							004	- 1		702 6	'
	l				11a-11d, 11f-24					804,1			793,6	
	1	•			ial Part IX, colum		•			3,570,9		<u>3,</u>	925,1	
		Revenue less e	xpenses Subtr	act line 18 fi	rom line 12	· · · · · ·	<u> </u>			136,8		ļ	<u>-74,9</u>	90.
5 8	1									ng of Curre	nt Year		l of Year	
aet Blar	20	Total assets (Pa	art X, line 16).						. [3,616,0)62.	3,	422,3	<u>13.</u>
8 8	21	Total liabilities (Part X, line 26)							353,2	288.		234,5	29.
Net Assets of Fund Balance	22	Net assets or fu	ind balances S	Subtract line	21 from line 20					3,262,	774	3.	187,7	84.
	rt II								`	<u> </u>	, <u>.</u> .		2017	
		<u> </u>		and this ration	netudina nonomno siud		d statements and	d to the b			alvat ut va			
com	plete De	claration of preparer	other than officer)	s based on all	nduding accompanying formation of which pre	eparer has any l	o statements, and knowleage	d to the b	est of filly kno	wiedge and b	eller, it is	/ Linde, Confect,	, and	
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_			rint name and title							 ,	Ţ			
		Print/Type pre	parer's name		Preparer's signature		Da	ate		Check	ıf	PTIN		
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	45 - 45									Phone no	(70		2-3306	N-
_					own above? (see		<u>s)</u>					. X Ye		No
BA	A For	Paperwork Re	duction Act N	otice, see ti	he separate inst	ructions.		TE	EA0101 11/	16/16		Fo	rm 990 (2	(016)

				CHARITIES			T	56-1	331429	Pa	age 2
Pard∭	Statement							- · · · · · · · · · · · · · · · · · · ·			
				e or note to any	ine in this Part	<u> </u>	<u></u>	<u></u>	<u></u>		·
	efly describe the o										
	eedway_Chi										
	ovide funds										
<u>of</u>	children u	with med	lical, ec	<u>lucational</u>	<u>or social</u>	<u>challe</u>	nges				
2 Did	the organization i	ındertake an	v consticant o	Vooram eanuces	during the year	which wore	not listed on th	e prior			
	m 990 or 990-EZ?			-				•	. Yes	∇	No
	es,' describe thes								. □ .ea		110
	the organization				ges in how it co	nducts, anv	program servic	es?	. Tyes	\sqrt{x}	No
	'es,' describe thes			-	g-0 //OW 1, 00		p. 0 g. a 0 0		. []	i.	
4 Des	scribe the organiza	ation's progra	am service ac	complishments fo	or each of its thr	ee largest pr	ogram service	s, as measur	ed by expens	es.	
Sec	ction 501(c)(3) and I revenue, if any, f	1 501(c)(4) or	rganizations a	re required to rep	ort the amount	of grants an	d allocations to	others, the	total expense	s,	
and	rievende, il any, i	or each prog	nam service i	eported							
4 a (Co	ode:)	(Evnenses	\$ 3 1/	19,002. inclu	ding grants of	\$ 2	121 467)	(Revenue	\$		0.)
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	501(c)(3)										. – – -
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	ring Fisca	l year e	ending 9/	/30/17 Spee	dway Chil	.dren's	Charities	distri	buted		
	re than \$3								- 		
es	timated 80	0,000 ch	nildren.	Since 198	12 the org	anizati	on has di	stribut			
mo	re than \$4	9 millic	on in gra	nts, assis	ting chil	dren in	need wit	h the			-
<u>to</u>	ols_to_bui	ld <u>a</u> bet	ter, bri	ghter and	healthier	<u>future</u>	·			- -	
											
				 							
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	ner program servio openses \$	-ca (Describe		uding grants of	Ś) (Revenue	¢		١	
	tal program servic	e expenses	▶	3,149,00		·) (i cevenue	<u> </u>			
	p g. s			0,140,00							



			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		X_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V · · · · · · · · · · · · · · · · · ·	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable	. C		<i>'</i> ;
;	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
1	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		X
(c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
(d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	F Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
-	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
	· // // / / /	13		Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	Х	



		i	Yes	No
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		<u>X</u>
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ŧ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	100	東欧、 松沙 四二	
ā	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34	Х	
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ļ	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37	_	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X	

BAA

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V

Check if Schedule O contains a response or note to any line in this Part V		П						
		es No						
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	15							
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	4							
c Did the organization comply with backup withholding rules for reportable payments to vendors and reporta	- 							
(gambling) winnings to prize winners?		Х						
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-								
ments, filed for the calendar year ending with or within the year covered by this return 2 a	0							
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b							
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u> </u>	X						
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	├──							
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other author financial account in a foreign country (such as a bank account, securities account, or other financial account.)	ority over, a nt)? 4 a	l x						
b If 'Yes,' enter the name of the foreign country. ►								
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Account	ints (FBAR)							
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	`	Х						
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X						
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c							
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	ranization							
solicit any contributions that were not tax deductible as charitable contributions?	6a	Х						
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or not tax deductible?	gifts were							
7 Organizations that may receive deductible contributions under section 170(c).								
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?								
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was re-								
Form 8282?		X						
d If 'Yes,' indicate the number of Forms 8282 filed during the year								
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contra		X						
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		Х						
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8 as required?								
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization Form 1098-C?	7 h							
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by	the sponsoring							
organization have excess business holdings at any time during the year?	8							
9 Sponsoring organizations maintaining donor advised funds.								
a Did the sponsoring organization make any taxable distributions under section 4966?								
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10 Section 501(c)(7) organizations. Enter								
a Initiation fees and capital contributions included on Part VIII, line 12								
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter								
a Gross income from members or shareholders								
b Gross income from other sources (Do not net amounts due or paid to other sources		1.						
against amounts due or received from them)								
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	17 12a							
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year								
13 Section 501(c)(29) qualified nonprofit health insurance issuers.								
a Is the organization licensed to issue qualified health plans in more than one state?	13a							
·								
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans								
c Enter the amount of reserves on hand								
14a Did the organization receive any payments for indoor tanning services during the tax year?		X						
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O								

Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			(X
Sec	tion A. Governing Body and Management			
000	tion A. Governing Body and management	Ī	Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year		103	
h	Enter the number of voting members included in line 1a, above, who are independent 1b	1	}	
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	li li		
-	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 7 a	Did the organization have members or stockholders?	6 7 a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			.,,
	stockholders, or persons other than the governing body?	7 b		X
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8 a	X	<u> </u>
	Each committee with authority to act on behalf of the governing body?	8 b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		X
800	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue		ado 1	
360	tion b. Folicies (This Section b requests information about policies not required by the internal Revent			No
4.5	D	40	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10 a	Х	
t	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 ь	Х	
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
	Did the process for determining compensation of the following persons include a review and approval by independent			
s	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15 a		X
	Other officers or key employees of the organization	15 b		
•	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)			
40.	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			1 .
162	taxable entity during the year?	16 a		Х
t	olf 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Sac	tion C. Disclosure	100		
18	List the states with which a copy of this Form 990 is required to be filed See Form 990, Page 6, Line 17 (continued) Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only);	– – – availal	 ole	- -
	for public inspection. Indicate how you made these available. Check all that apply X Own website. X Another's website. X Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year	e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Nancy Bisson 5401 E. Independence Blvd Charlotte NC 28212 (79	04)	532-	3306

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Page 7

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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Form 990 (2016)

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
				(C))					
(A) Name and Title	(B) Average hours per	than	one both	box, u an of ector/	untess fficer fruste		n	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) O. Bruton Smith	0.20						1			
Chairman	40.00	_		Х	L_		L	0.	0.	0.
(2) Marcus Smith	0.20									
Chairman	40.00			Х	L			0.	0.	0.
(3) Jerry Caldwell	0.20									
Director	40.00				L		L	0.	0.	0.
(4) Ed_Clark	_0.20									
Director	40.00	X					_	0.	0.	0.
(5) Conrad Clement	0.30									
Director	<u> </u>	X	L			<u> </u>	L	0.	0.	0.
(6) Eddie Gossage	0.20									
Director	40.00	X			_		L	0.	0.	0.
_(7)_Jeff_Hammond	0.20	1				İ	1			
Director		Х				<u> </u>	L	0.	0.	0.
(8) Don Hawk	0.20		ļ							
Director	40.00				<u> </u>	<u> </u>	L	0.	0.	0.
(9) David McGrath	0.20									
Director	40.00		<u> </u>			<u> </u>		0.	0.	0.
(10) Steve Page	0.20									
<u>Director</u>	40.00			<u> </u>		<u> </u>	<u>L</u>	0.	0.	0.
(11) Chris Powell	0.20		l							
Director	40.00		_		<u> </u>	<u> </u>	$oxed{oxed}$	0.	0.	0.
(12) Tyler Schropp	0.20									!
Director		Х				<u> </u>	L	0.	0.	0.
(13) Mark Simendinger	0.20						1			
Director	40.00	Х		L		<u>L</u> _	L	0.	0.	0.
(14) Marcy Smothers	0.20									
Director	<u> </u>	X		<u> </u>		<u> </u>	<u>L</u>	0.	0.	0.

TEEA0107 11/16/16

Part VIII Section A. Officers, Directors, Tru		∢ey □	<u>E</u> m			es, a	anc	l Highest Com	pensated Emp	loyees (continued)	
(A) Name and title	Average hours per week (list any	box, offi	unles cer an	Position not check more than on unless person is both a er and a director/truster			an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	hours for related organiza - tions below dotted line)	Individual trustee or director	nstitutional trustee	Officer	ey employee	Highest compensated employee	ımer	(11-21033-11130)	(VPZ 10354MISC)	organization and related organizations	
(15) Greg Walter Director	0. <u>20</u> 40.00	х						0.	0.	0.	
(16) James Green III Secretary	1.00			х			-	0.	0.	0.	
(17) Randall Storey Treasurer/Assistant Secretary	0.40 40.00			Х				0.	0.	0.	
(18) Chuck Swannack Executive Director	40.00			Х				0.	60,208.	0.	
(19)									,		
(20)											
(21)										- ··	
(22)											
(23)											
(24)											
(25)											
1 b Sub-total							>	0.	60,208.	0.	
d Total (add lines 1b and 1c)								0.	60,208.	0.	
2 Total number of individuals (including but not limite from the organization ► −0 −	d to those	listed	abo	ove)	who	o rec	eive	d more than \$100,	000 of reportable co	mpensation	
3 Did the organization list any former officer, director	, or trustee	e, key	/ em	ploy	/ee,	or hi	ghe	st compensated er	nployee	Yes No	
on line 1a? If 'Yes,' complete Schedule J for such if For any individual listed on line 1a, is the sum of re	portable c	ompe	nsat	lion	and	othe	r co	mpensation from		. 3 X	
the organization and related organizations greater to such individual			• •	٠.	• •					. 4 X	
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' of Section B. Independent Contractors	compensation S	ion ir Sched	om a lule .	any <i>J foi</i>	unre r suc	ch pe	rsor	ganization or indivi	dual	. 5 X	
Complete this table for your five highest compensal compensation from the organization. Report compe	ted indepe	nden	t cor	ntra enda	ctor:	s that ar en	rec	eived more than \$	100,000 of organization's tax y	ear	
(A) Name and business addr					•			(B Description of)	(C) Compensation	
			_								
2 Total number of independent contractors (including	hut not by	nitod	to th	2000	a line	od at	2011) who recould	are then		
\$100,000 of compensation from the organization	>	TEFA		-0	_	ou al		., who received mo	ore mail	Form 990 (2016)	

	 Check if Schedule O contains a response or note 	e to any line	e in this Part VIII			<u>.</u>
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
इ इ	1 a Federated campaigns 1 a					
필	b Membership dues 1 b		ľ	Ï		
ع ج	c Fundraising events 1 c					
<u> </u>	d Related organizations 1 d					
뜨림	e Government grants (contributions) 1 e					
쫎띪	o covernment grains (commoditions)					
er fi	f All other contributions, gifts, grants, and similar amounts not included above 1 f 4 . 0.64		İ			
호된	similar amounts not included above	4,331.	ì			
Contributions, Gifts, Grants and Other Similar Amounts	g Noncash contributions included in lines 1a-1f \$ 548	8,657.				
	h Total. Add lines 1a-1f	•	4,064,331.			
Ĕ	Busines	ss Code				
Ş.	2a					
8	b					
ice	c					
Š	d					
Ë	e					
gra	f All other program service revenue · · ·					
Program Service Revenue	g Total. Add lines 2a-2f	•				
	3 Investment income (including dividends, interest as					
	other similar amounts)	▶				
	4 Income from investment of tax-exempt bond proce	L-				
	5 Royalties	<u> </u>			<u></u>	
		'ersona!				
	6 a Gross rents					
	b Less rental expenses		1	ļ		
	c Rental income or (loss)			İ		
	<u> </u>					
	d Net rental income or (loss)	Other				
	7 a Gross amount from sales of assets other than inventory	Other				
	assets other trial liveriory					
	b Less cost or other basis					
	and sales expenses	11.				İ
	c Gain or (loss)	<u>-11.</u>				
	d Net gain or (loss) · · · · · · · · · · · · · · · · · ·	···· •	-11.	0.	0.	-11.
ब्	8 a Gross income from fundraising events					1
Other Revenu	(not including. \$ 2,845,858.					ĺ
ě	of contributions reported on line 1c)	İ				
Œ	See Part IV, line 18					
Ę	b Less direct expenses $\dots $ b $1,32$		· · · · · · · · · · · · · · · · · · ·			
రౌ	c Net income or (loss) from fundraising events	🟲	-270,451.		0.	-270,451.
	9 a Gross income from gaming activities					1
		4,924.		į		
		8,647.			····	
	c Net income or (loss) from gaming activities	>	56,277.	0.	0.	56,277.
	10 a Gross sales of inventory, less returns					
	and allowances a					
	b Less cost of goods sold b					
	c Net income or (loss) from sales of inventory	►				
	Miscellaneous Revenue Busine	ss Code				
	11a				··· ··· ··	
	b					<u> </u>
	c					<u> </u>
	d All other revenue · · · · · · · · ·					
	e Total. Add lines 11a-11d	L				
	12 Total revenue. See instructions	▶	3,850,146.	0.	0.	-214,185.

Part IX | Statement of Functional Expenses

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	3,131,467.	3,131,467.	general expenses	ехрепаез
Grants and other assistance to domestic individuals See Part IV, line 22 · · · · · · ·		<u> </u>		
3 Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members		-		
5 Compensation of current officers, directors, trustees, and key employees				
Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	_			
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal · · · · · · · · · · · · · · · · · · ·				
c Accounting	22,000.	0.	22,000.	0.
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion		0.	0.	9,519.
13 Office expenses		0.	0.	30,343.
14 Information technology				
15 Royalties				
16 Occupancy		0.	0.	<u> </u>
17 Travel	34,623.	0.	11,959.	22,664.
Payments of travel or entertainment expenses for any federal, state, or local public officials	-			
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,406.	0.	0.	4,406.
 23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 	20,000	0.	2,756.	7,783.
a Payroll Services	517,992.	17,535.	64,970.	435,487
b				
c				
d		. 		
e All other expenses	162,582.	0.	0.	162,582.
25 Total functional expenses Add lines 1 through 24e	3,925,136.	3,149,002.	101,685.	674,449.
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following				
SOP 98-2 (ASC 958-720)	TEEA0110 11/		L	Form 990 (2016)

Part X Balance Sheet



(A) Beginning of year End of year 1 2,888,265 3,150,722. 2 3 3 652,022 230, 234. 16,750 4 0 Loans and other receivables from current and former officers, directors, 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 8 23,218 23,404 Prepaid expenses and deferred charges 24,141 9 384 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 46.428 10 b 11,480 10 c 10,755 11 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 15 Other assets See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,422,313 16 3,616,062 17 17 169, 215 96,465 18 18 72,925 78,213 19 105,860 19 65,139. 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . 25 26 Total liabilities. Add lines 17 through 25.......... 353,288 529 234, Organizations that follow SFAS 117 (ASC 958), check here ▶ 🛛 and complete Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 3,262,774 187,784 28 29 29 or Fund Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Assets Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds. 32 Net. 33 262,774 33 3,187,784 34 3,616,062 3,422,313

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Form 990 (2016)

ori	m 990 (2016) SPEEDWAY CHILDREN'S CHARITIES 56-	1331429		Pa	ge 12
Pa	rt∤XI≇ Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. \sqcap
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,8	50,1	46.
2	Total expenses (must equal Part IX, column (A), line 25)	2		25,1	
3	Revenue less expenses Subtract line 2 from line 1	3		74,9	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		62,7	
5	Net unrealized gains (losses) on investments	5	<u> </u>	027.	<u>, , , , , , , , , , , , , , , , , , , </u>
6	Donated services and use of facilities	6			
7	Investment expenses	7	-		
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	3,1	87,7	84.
Pa	rt:XII‡ Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990. Cash XAccrual Other		KTAN	被推	Serie.
	If the exceptation of except to well address of the control of the				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				100 A
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	5-22-2-2-2	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a		1.3.4	To Carlo	\$ X *
	separate basis, consolidated basis, or both.	i			3
	Separate basis Consolidated basis Both consolidated and separate basis		State Mr.		مشتعد
	b Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate			100 M	die:
	basis, consolidated basis, or both				363 2.32
	X Separate basis			******************	
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud	lit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2 c	X	L
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			13.	225
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single			At	نمث
•	Audit Act and OMB Circular A-133?		3 a		Х

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

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Form 990 (2016)

TEEA0112 11/16/16

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

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		organization					Employer identifica	aon namber
SPE	ΣDV	AY CHILDREN'S CHAR	ITIES				56-1331429)
වැර	0	Reason for Public Cha	rity Status (All or	ganizations must co	mplete	this p		
he o	rgar	nization is not a private foundati	on because it is (For I	ines 1 through 12, check	only on	e box)		
1	П	A church, convention of church	es, or association of c	hurches described in sec	ction 170)(b)(1)(A	A)(i).	1
2	П	A school described in section	170(b)(1)(A)(ii). (Attac	h Schedule E (Form 990	or 990-l	ΞZ))		\setminus \setminus
3	П	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).						
4	П	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's						
	ш		-,,,,,					· · · · · · · · · · · · · · · · · · ·
A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).								
	ш	section 170(b)(1)(A)(iv). (Cor	nplete Part II)	or aniversity owned or of	berateu t	y a gov	emmental unit described	1 111
6		A federal state or local govern	ment or governmental	Lunit described in sectio	n 170/h	/11/A1/v	1	
		An organization that normally r	eceives a substantial p Complete Part II)	part of its support from a	governm	iental ur	nit or from the general pu	iblic described
R	\Box			(vi) (Complete Part II.)				
^	H				arotad u		otion with a land grant of	allaga
9	Ш							
		•	it conege or agriculture	(See matructions) Line	i tric riai	ne, city,	and state of the conege	OI .
10	\Box							
. •	TAIL OLGANIZATION THAT HOLINATIVE TECHNES (1) HIGHE THAIL 33-1/3% OF ItS SUPPORT HOLI CONTIDUTIONS, MEMBERSHIP TEES, AND GIOSS TECHNIS							
		investment income and unrelat	ted business taxable in	icome (less section 511)	tax) from	busines	sses acquired by the org	anization after
				•			(-)(4)	
	Н	•	•	•				
12	Ш	An organization organized and	operated exclusively f	for the benefit of, to perfo	orm the f	unctions	of, or to carry out the p	urposes of one
		lines 12a through 12d that des	cribes the type of supp	orting organization and	complete	lines 1	2e, 12f, and 12g	
а		Type I. A supporting organizat	ion operated, supervis	ed, or controlled by its si	upported	organiz	ation(s), typically by givi	ng the supported
		complete Part IV. Sections A	gularly appoint or elec , and B .	t a majority of the directo	ors or tru	stees of	the supporting organiza	tion You must
b				trolled in connection with	its supp	orted or	ganization(s) by having	control or
	ш	management of the supporting	organization vested in					
_		•					_	
С	Ш	Type III functionally integrate organization(s) (see instruction	ed. A supporting organ	ization operated in conn	ection w	ith, and	functionally integrated w	ith, its supported
ď		` ', '	•				its supported organization	in(s) that is not
	_	functionally integrated. The org	ganization generally mi	ust satisfy a distribution :	requirem	ent and	an attentiveness require	ement (see
		•	•	•		_		.4
•		integrated, or Type III non-fund	ion received a written o ctionally integrated sup	determination from the H poorting organization	RS that if	is a ly	pe I, Type II, Type III fun	ctionally
f	En	ter the number of supported org						
g	Pr	ovide the following information a	about the supported or	ganization(s)				<u> </u>
	(1) Na	arne of supported organization	(II) EIN	(iii) Type of organization	(iv) Is		(v) Amount of monetary	(vi) Amount of other
				(described on lines 1-10 above (see instructions))	in your go	on listed overning	support (see instructions)	support (see instructions)
					docun	nent? 	l	
					Yes	No_		
<u>A)</u>					L			
					1			
<u>B)</u>								
C)					<u> </u>			
							1	
D)					<u> </u>			
<u>E)</u>								
<u>.</u> , .								
Γotal							H	Ī

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sect	tion A. Public Support						
Caler Degir	ndar year (or fiscal year nning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	3,578,251.	3,052,930.	3,648,199.	3,867,703.	4,064,331.	18,211,414.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	3,578,251.	3,052,930.	3,648,199.	3,867,703.	4,064,331.	18,211,414.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,691,982.
6	Public support. Subtract line 5 from line 4 · · · · · · · · · · · · · · · · · ·						16,519,432.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	3,578,251.	3,052,930.	3,648,199.	3,867,703.	4,064,331.	18,211,414.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	1,080,758.	1,126,512.	1,112,792.	1,275,494.	1,216,110.	5,811,666.
11	Total support. Add lines 7 through 10 · · · · · · · · · ·]					24,023,080.
12	Gross receipts from related activit	ies, etc (see instru	uctions)			12	
13	First five years. If the Form 990 i organization, check this box and s	is for the organization of the stop here	ion's first, second,	third, fourth, or fift	h tax year as a sec	ction 501(c)(3)	▶ []
Sec	tion C. Computation of Pu	blic Support F	Percentage				
14	Public support percentage for 201						
	Public support percentage from 20						
16a	33-1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b	33-1/3% support test—2015. If the and stop here. The organization	ne organization did qualifies as a publi	not check a box o cly supported orga	n line 13 or 16a, a anization	nd line 15 is 33-1/3	3% or more, check	this box
17a	10%-facts-and-circumstances to or more, and if the organization meets the 'facts-the organization meets the 'facts-	est—2016. If the or neets the 'facts-and and-circumstances	rganization did not i-circumstances' te i' test The organiz	check a box on lirest, check this box ation qualifies as a	ne 13, 16a, or 16b, and stop here. Ex a publicly supporte	and line 14 is 109 plain in Part VI ho d organization .	%
	10%-facts-and-circumstances to more, and if the organization morganization meets the 'facts-and-	neets the 'facts-and -circumstances' tes	f-circumstances' te st. The organizatio	est, check this box n qualifies as a pu	and stop here. Ex blicly supported or	plain in Part VI ho ganization	w the
18	Private foundation. If the organize	zation did not chec	k a box on line 13,	, 16a, 16b, 17a, or	17b, check this bo	x and see instruct	tions · · · · · ►
BAA			-		Sc	hedule A (Form	990 or 990-EZ) 2016

Part'Illa Support Schedule for Organizations Described in Section 509(a)(2)

Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

	tion A. Public Support				•		
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						7
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5					/	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b				/		
	Public support. (Subtract line 7c from line 6)						
<u>Sec</u>	tion B. Total Support		· · · · · · · · · · · · · · · · · · ·		····		,
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6		}				1
40-							
TUE	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	payments received on securities loans, rents, royalties and income from similar sources						
b	payments received on securities loans, rents, royallies and income from similar sources						
b 11 12	payments received on securities loans, rents, royallies and income from similar sources						
b c 11 12	payments received on securities loans, rents, royallies and income from similar sources						
b c 11 12 13 14	payments received on securities loans, rents, royallies and income from similar sources	top here/		third, fourth, or fiftl	h tax year as a sec	tion 501(c)(3)	
b c 11 12 13 14 Sec	payments received on securities loans, rents, royalties and income from similar sources	top here/ blic Support F	Percentage				
11 12 13 14 Sec 15	payments received on securities loans, rents, royallies and income from similar sources	blic Support F 6 (line 8,/column (Percentage f) divided by line 1	3, column (f))			96
b c 11 12 13 14 Sec 15 16	payments received on securities loans, rents, royalties and income from similar sources	blic Support F 6 (line 8, column (1 015 Schedule A, P	Percentage f) divided by line 1 art III, line 15.	3, column (f))			
11 12 13 14 Sec 15 16 Sec	payments received on securities loans, rents, royalties and income from similar sources	blic Support F 6 (line 8, column (i 015 Schedule A, P restment Incol	Percentage f) divided by line 1 art III, line 15 me Percentag	3, column (f))			8
11 12 13 14 Sec 15 16 Sec 17	payments received on securities loans, rents, royalties and income from similar sources	blic Support F 6 (line 8,/column (i 015 Schedule A, P restment Incor 2016 (line 10c, co	Percentage f) divided by line 1 art III, line 15 me Percentag blumn (f) divided by	3, column (f))	0))		\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
11 12 13 14 Sec 15 16 Sec 17 18	payments received on securities loans, rents, royalties and income from similar sources	blic Support F 6 (line 8, column (i 015 Schedule A, P restment Incol r 2016 (line 10c, co	Percentage f) divided by line 1 art III, line 15 me Percentag blumn (f) divided by A, Part III, line 17	3, column (f))	n)		\&\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
11 12 13 14 Sec 17 18 19a	payments received on securities loans, rents, royallies and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and set in C. Computation of Public support percentage for 201 Public support percentage from 201 Investment income percentage for 33-1/3% support tests—2016. If so not more than 33-1/3%, check the second in the similar test and the support tests—2016. If so not more than 33-1/3%, check the second income than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so not more than 33-1/3%, check the second income percentage from 201 public support tests—2016. If so	blic Support F 6 (line 8, column (in the support F) 7 (estment Incolumn 2016 (line 10c, column 2015 Schedule the organization dishis box and stop F)	Percentage f) divided by line 1 art III, line 15 me Percentag blumn (f) divided by A, Part III, line 17 d not check the bonere. The organiza	a, column (f)) e line 13, column (f) x on line 14, and litton qualifies as a	f))	15	\begin{align*} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
11 12 13 14 Sec 17 18 19a b	payments received on securities loans, rents, royalties and income from similar sources	blic Support F 6 (line 8, column (in the column term) 7 2016 (line 10c, column 2015 Schedule A, P) 7 2016 (line 10c, column 2015 Schedule A) 8 2015 Schedule A 8 2016 Schedule A 8 2016 Schedule	Percentage f) divided by line 1 art III, line 15. me Percentag blumn (f) divided by A, Part III, line 17 d not check the bothere. The organization of the check a box d stop here. The o	a, column (f))	ne 15 is more thar publicly supported 9a, and line 16 is ies as a publicly sup	15	% % % % % e 17 ► ☐ b, and on ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

1	Are all of the organization's supported organizations listed by name in the organization's governing documents?
	If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe
	the designation. If historic and continuing relationship, explain

- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- ${f c}$ Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- ga Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes, answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		Yes	No
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	3b		
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	9a		
	9b		
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	10a		

10b



Fal	Supporting Organizations (continued)		
44		Yes	No
	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the		
·	governing body of a supported organization?	11a	
ı	A family member of a person described in (a) above?	11b	
	A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c	
Sec	tion B. Type I Supporting Organizations		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities if the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	Yes	No
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2	
Sec	tion C. Type II Supporting Organizations		
		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1	
Sec	tion D. All Type III Supporting Organizations		
		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3	·
Sec	tion E. Type III Functionally Integrated Supporting Organizations		<u>' </u>
	Check the hay payt to the method that the experience used to establish the Integral Part Took during the year/age instruction		
٠	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instruction	is).	
	The organization satisfied the Activities Test Complete line 2 below		
	b The organization is the parent of each of its supported organizations. Complete line 3 below		
1	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see insti	ructions)	
2	Activities Test Answer (a) and (b) below.	Yes	No
i	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a	
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b	
3	Parent of Supported Organizations Answer (a) and (b) below.		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes.' describe in Part VI the role played by the organization in this regard	3h	

CCIT	ddie X (1-0111 350 01 350-12) 2010 SPEEDWAI CHILDREN S CHARIIIES		30-133)1423 i age 0
Par	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on N instructions. All other Type III non-functionally integrated supporting organizations m	lov 20 ust co	D, 1970 (explain in Part VI mplete Sections A through) See h E
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1 a		
k	Average monthly cash balances	1 b		
	Fair market value of other non-exempt-use assets	1 c		
_ (Total (add lines 1a, 1b, and 1c)	1 d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4_		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5_		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section 8, line 8, Column A)	3		

	tem	nporary reduction (see instructions)	6	
7		Check here if the current year is the organization's first as a no (see instructions)	on-functionally integrated Type III supporting o	rganization

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

5

BAA

Enter greater of line 2 or line 3

Income tax imposed in prior year

Schedule A (Form 990 or 990-EZ) 2016

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	upporting Organiza	ntions (continued)	31125
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpos	ses		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	ons,		
3	Administrative expenses paid to accomplish exempt purposes of suppo			
_4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI) See instructions.	ation is responsive (provi	de details	
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required — explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2016			
a				
b				
c	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			_
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			T
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from Section D, line 7 \$			
а	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c			
8	Breakdown of line 7.			
а				
b	Excess from 2013			
С	Excess from 2014			
d	Excess from 2015			

e Excess from 2016 . . . BAA

Schedule A (Form 990 or 990-EZ) 2016

SPEEDWAY CHILDREN'S CHARITIES Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information. (See instructions.)

Pt II Ln 10

Other Income Part II, Line 10 Description: Event Revenue 2012: 1080758. 2013: 1126512. 2014: 1112792. 2015: 1275494. 2016: 1216110.

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes' on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2016

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

	SPEEDWAY CHILDREN'S CHARITIES		56-1331429	
Par	Organizations Maintaining Donor Advised Funds or Other Similar Fur Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.			
	(a) Donor advised funds	(b) F	unds and other accou	nts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor a are the organization's property, subject to the organization's exclusive legal control?	dvised funds	· · · · TYes	No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purposermissible private benefit?	be used only se conferring	· · · · Yes	No
Par	Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7			
1	- specify of the terret and the terret and the tree and the terret			
	Preservation of land for public use (e.g., recreation or education)	f a historically	ımportant land area	
	Protection of natural habitat Preservation of	f a certified hi	storic structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the foliast day of the tax year	orm of a cons	ervation easement on	the
			leid at the End of the	Tax Year
	Total number of conservation easements			
	Total acreage restricted by conservation easements	——		
•	Number of conservation easements on a certified historic structure included in (a)	. 2c		
(Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	. 2 d		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by tax year ▶	y the organiza	ation during the	
4	Number of states where property subject to conservation easement is located ▶	_		
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling and enforcement of the conservation easements it holds?			No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing of	conservation e	easements during the	year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conse	ervation easei	ments during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section and section 170(h)(4)(B)(ii)?	170(h)(4)(B)((i) Yes	No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expinclude, if applicable, the text of the footnote to the organization's financial statements that describe conservation easements	ense stateme es the organi	ent, and balance sheet exation's accounting fo	, and or
Par	t III: Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.	Other Sin	nilar Assets.	
1 ;	alf the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue s' art, historical treasures, or other similar assets held for public exhibition, education, or research in in Part XIII, the text of the footnote to its financial statements that describes these items.	tatement and furtherance o	balance sheet works of public service, provi	of de,
ı	o If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue state, historical treasures, or other similar assets held for public exhibition, education, or research in furtifollowing amounts relating to these items	ment and bala herance of pu	ance sheet works of a blic service, provide t	rt, he
	(i) Revenue included on Form 990, Part VIII, line 1		•	
	(ii) Assets included in Form 990, Part X		·	
	If the organization received or held works of art, historical treasures, or other similar assets for fina amounts required to be reported under SFAS 116 (ASC 958) relating to these items		· ·	
6	a Revenue included on Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·		▶\$	
	Assets included in Form 990 Part X		~ ¢	

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		KEN'S CHARITIE		56-1331	
Pant Maintai	ining Collect	ions of Art, Histo	<u>orical Treasures, or</u>	Other Similar Asse	ets (continued)
 Using the organization's acquisition items (check all that apply) 	n, accession, and	other records, check	any of the following that a	are a significant use of its	collection
a Public exhibition		d Loan	or exchange programs		
b Scholarly research		e Other	_		
c Preservation for future generat	tions				
4 Provide a description of the organiz Part XIII	zation's collection	is and explain how the	ey further the organization	n's exempt purpose in	
5 During the year, did the organization to be sold to raise funds rather than	n t <u>o be maintain</u> e	ed as part of the organ	ization's collection?	<u></u>	Yes No
Escrow and Custodia line 9, or reported an ar	I Arrangement Mount on Fort	n ts. Complete if the most of	he organization ansv e 21.	vered 'Yes' on Form	990, Part IV,
1 a Is the organization an agent, truste on Form 990, Part X?	e, custodian or c	ther intermediary for o	contributions or other asse	ets not included	Yes No
b If 'Yes,' explain the arrangement in				•	
					Amount
c Beginning balance				. 1c	
d Additions during the year				. 1d	
e Distributions during the year · · ·					
f Ending balance					
2 a Did the organization include an am					Yes No
b If 'Yes,' explain the arrangement in				· .	
	Section Section			000 0 (07)	
Part V Endowment Funds. C					
A Barrier of Aut	(a) Current yea	r (b) Prior year	r (c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					ļ <u></u>
b Contributions					,
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					†
2 Provide the estimated percentage	of the current ve	ar end balance (line 1	g_column (a)) held as		<u>'</u>
a Board designated or quasi-endowr	•	9	g, 00.a (a)) 1.0.a ab		
b Permanent endowment		 °			
c Temporarily restricted endowment	_ 	96			
The percentages on lines 2a, 2b, a					
•	•				
3 a Are there endowment funds not in	the possession of	of the organization tha	t are held and administer	ed for the	No. 1 No.
organization by					Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If 'Yes' on line 3a(ii), are the relate	•	•		• • • • • • • • • • • •	. 3b
4 Describe in Part XIII the intended i		ization's endowment	funds		
Land, Buildings, and Complete if the organiz		ed 'Yes' on Form	990, Part IV, line 11:	a. See Form 990, Pa	art X, line 10
Description of property) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land			\-\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
b Buildings					
c Leasehold improvements	· —		 		
d Equipment	}—		37 (40	07.050	10 207
e Other.	<u> </u>		37,649.	27,252.	10,397
			0 770 1	0 401 1	ירח
Total. Add lines 1a through 1e (Column		Form 000 Port V!	8,779.l	8,421.	358 10,755

LDREN'S	CHARITIES	

Part VII Investments — Other Securities. Complete if the organization answered "	Yes' on Form 990. F	Part IV. line 11b. See Form 990. Pa	rt X. line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-ye	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
Total (Column (b) must equal Form 990, Part X, column (B) line 12) ▶			
Part VIII Investments – Program Related. Complete if the organization answered "	Yes' on Form 990, F	Part IV, line 11c. See Form 990, Pa	rt X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
_ (7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)►	<u> </u>		
Part IX Other Assets. Complete if the organization answered '	Ves' on Form 990 I	Part IV line 11d See Form 990 Pa	art X line 15
	escription	<u> </u>	(b) Book value
(1)			
(2)			
(3)			
_ (4)			
_(5)			
(6)			
<u>(7)</u> (8)			
(9)			
(10)	 -		
Total. (Column (b) must equal Form 990, Part X, column (B)	line 15)		
Part X Other Liabilities.	<u> </u>		
Complete if the organization answered 'Yes' on I	Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25	
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)			
(3)			
<u>(4)</u> (5)			
(6)		—	
(7)			
(8)			

Total (Column (b) must equal Form 990, Part X, column (B) line 25) . . . ▶ 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain

(9) (10)(11)

579,853.

3,925,136.

3,925,136.

Schedule D (Form 990) 2016 SPEEDWAY CHILDREN'S CHARITIES Rackil Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a Total revenue, gains, and other support per audited financial statements 4,429,999. 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 2 a 2 b 579,853. 2 c 579,853. 3,850,146. 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)...... 3,850,146. Rankill Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 4,504,989. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2 a 2 b 2 c

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b. . . .

Part XIII Supplemental Information.

The Organization has implemented the provisions of FASB ASC 740-10 relating to the accounting for uncertainty in income tax positions. FASB ASC 740-10 prescribes a comprehensive model for the financial statement recognition, measurement, presentation and disclosure of income tax uncertainties with respect to positions, including tax-exempt status, taken or expected to be taken in income tax returns. Organization's income tax returns for its reporting periods ended during the years 2014 through 2016 are still subject to examination by the IRS.

4 a

Pt X, Line 2

BAA

Schedule D (Form 990) 2016

SCHEDULE G (Form 990 or 990-EZ)

Supplemental information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

► Attach to Form 990 or Form 990-EZ

OMB No 1545-0047 2016 Open to Public Inspection

Department of the Treasury Internal Revenue Service Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number SPEEDWAY CHILDREN'S CHARITIES 56-1331429 Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17 Pant Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants f b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events C g d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid to (vi) Amount paid to (iii) Did fundraiser (iv) Gross receipts (i) Name and address of individual (or retained by) (ii) Activity (or retained by) have custody or control of contributions? or entity (fundraiser) from activity fundraiser listed in organization column (i) Yes No 1 3 6 7 9 10 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

R		List events with gross receipts great	(a) Event #1 NC Dinner (event type)	(b) Event #2 TX Dinner (event type)	(c) Other events 68 (total number)	(d) Total events (add column (a) through column (c))
MCZM ZM	1	Gross receipts	921,277.	350,225.	2,625,542.	3,897,044.
Ĕ	2	Less: Contributions	806,666.	248,312.	1,790,880.	2,845,858.
	3	Gross income (line 1 minus line 2)	114,611.	101,913.	834,662.	1,051,186.
	4	Cash prizes			10,000.	10,000.
	5	Noncash prizes			7,985.	7,985.
DIRECT	6	Rent/facility costs	1,934.		27,561.	29,495.
C T	7	Food and beverages	66,277.	27,916.	125,387.	219,580.
E X P	8	Entertainment	100,000.	25,000.	3,000.	128,000.
EXPEZSES	9	Other direct expenses	14,071.	87,699.	824,807.	926,577.
_	10 11	Direct expense summary Add lines 4 through Net income summary Subtract line 10 from Gaming. Complete if the organizati	line 3, column (d)	<u></u>	, <u>.</u> >	-270,451.
1 (41)		\$15,000 on Form 990-EZ, line 6a.			, mic 10, or reporte	
REVENUE			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ŭ	1	Gross revenue			164,924.	164,924.
F	2	Cash prizes			43,363.	43,363.
DIRECT S	3	Noncash prizes			52,801.	52,801.
T E	4	Rent/facility costs				
	5	Other direct expenses	Yes %	Yes %	12,483. X Yes 90.00%	12,483.
	6	Volunteer labor	No	No	No	
	7	Direct expense summary Add lines 2 throu	gh 5 ın column (d)			108,647.
	8	Net gaming income summary Subtract line	7 from line 1, column (d	d)	<u> </u>	56,277.
	alst	er the state(s) in which the organization cond ne organization licensed to conduct gaming a lo,' explain	ctivities in each of these	See Part III, Line 9 (LJ LJ
		re any of the organization's gaming licenses i	revoked, suspended or t		year?	Yes XNo

301100	Jule O (1.01111 330 01 330-E	-2/2010 SPEEDWAI	CHILDREN 3	CHARLITES		10-1331	423	r age s
11	Does the organization cor	nduct gaming activities wi	th nonmembers? .				X Yes	No
12	Is the organization a gran administer charitable gam	tor, beneficiary or trustee	of a trust, or a mem	ber of a partnership	or other entity formed	to 	Yes	XNo
13	Indicate the percentage of	f gaming activity conduct	ed in [.]			1 1		
	The organization's facility					. 13a		0.00%
	An outside facility							0.00%
14	Enter the name and addre	ess of the person who pre	epares the organizati	on's gaming/special	events books and rec	ords		
	Name ► <u>Nancy Bis</u>	<u>son</u>						
	Address ► <u>5401_E</u> .	<u> Independence B</u>	<u> Slvd Charlott</u>	e, NC 28212				
15 a	Does the organization have	ve a contract with a third	party from whom the	organization receive	es gaming revenue?		. Yes	XNo
b	if 'Yes,' enter the amount	of gaming revenue recen	ved by the organizati	on ► \$	and	the amount	1	_
	of gaming revenue retains	ed by the third party	\$					
С	If 'Yes,' enter name and a	ddress of the third party						
	Name •							
16	Gaming manager informa	ition						
	Name ► <u>See Part</u>	<u>IV</u>						
	Gaming manager comper	nsation • \$	0.					
	Description of services pr	ovided ► <u>Oversic</u>	ght_of_gaming	<u>operations</u>				
	Director/officer	XEmployee	[Independent cont	tractor			
17	Mandatory distributions							
а	Is the organization require state gaming license?	ed under state law to mai	ke charitable distribu	tions from the gamir	ng proceeds to retain t	he	_XYes	No
b	Enter the amount of distri	butions required under st				t in the		
	organization's own exemp		year > \$	117,643.				
Par	Supplemental and Part III, line information. Se	es 9, 9b, 10b, 15b, 1	de the explanation of the following the foll	as applicable A	Part I, line 2b, colu Also provide any a	ımns (III) dditional	and (v);	
	,	BJ Mathis, Clau Anderson, and C oversaw local g salary was allo	heryl LaPrad aming events	e, Speedway as part of	Children's Ch their position	aritie on with	s emplo	No
Lin	e 16	their responsib	ilities.	- 1	-			

SCHEDULE I

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

2016

OMB No 1545-0047

Open to Public

ž Employer Identification number X Part IIIs Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on 56-1331429 Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed. 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States SPEEDWAY CHILDREN'S CHARITIES

Part: 图 General Information on Grants and Assistance Name of the organization

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (f applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) The Parenting Center	23-7454254	501(c)(3)	125,000.				Therapy Equip
 	27-2417202	501(c)(3)	100,000.				Skin disorder
s eet 7601	62-1765487	501(c)(3)	65,000.				Tutor, Mentor
미제	02-0762123	501(c)(3)	40,000.				Child care
<u>-</u>	58-1872217	501(c)(3)	37,000.				Youth camp
tal at Da cer Drive 6	26-4812335	501(c)(3)	32,983.				Medical care
<u> ub</u> <u>enue</u>	26-1507549	501(c)(3)	30,000.				Colleg, Work
(8) Charity_League, Inc PO Box 471332 Charlotte NC 28210	56-0560327	501(c)(3)	30,000.				Food, Clothing
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 • Enter total number of other organizations listed in the line 1 table	and government organs Isted in the line 1 t	inizations listed in the	line 1 table				204
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instruction	ıs for Form 990.		TEEA3901 11/03/16	11/03/16	Schedu	Schedule I (Form 990) (2016)

990 - Sch I - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

56-1331429

For the Calendar year 2016 or the tax year penod beginning 10-01 and ending 9-30-17

Speedway Children's Chartles

(a) Name of organization	Address		(b) EIN	(c)IRC section	(d) Amount of (cash grant	(e) Amount of (f) Monocash of assistance value	(f) Method (g) of Description of valuation con-cash	(h) Purpose of grant or assistance
The Parenting Center	2928 West 5th Street	Fort Worth, TX 76107	23-7454254	501(c)(3)	\$125,000 00			Rebuild playground including the installation of sensory playground equipment to be used as theraperate play fools during therapy sessions for children.
EB Research Partner	132 East 43rd Street, Suite 432	New York, NY 10017	27-2417202	501(c)(3)	\$100,000 00			Treat and cure EB, life threatening skin disorders from birth
Coaithan for Kids	2423 Susennah Street	Johnson City, TN 37601	62-1765487	501(c)(3)	\$65,000 00			Awesome Kids Club tutoning and mentoning
Discovery Home Care, Inc	816 Peaceful Glen Road	Charlotte, NC 28273	02-0762132	501(c)(3)	\$40,000 00			Care for non-DSS essociated children while linding homes or community services
Camp Sunshine	1850 Clairmont Rd	Decatur, GA 30033-3405	58-1872217	501(c)(3)	\$37,000 00			Camp Expensence for Children/Teens with Cancer
Children's Hospital et Dartmouth	One Medical Center Dirve	Lebanon, NH 03756	26-4812335	501(c)(3)	\$32,983.00			Provide outstanding compassionale care for children and their families
Boys & Girls Clubs of Sonome Valley	100 W Verano Avenue	Sonoma, CA 95476	94-1579901	501(c)(3)	\$30,000 00			Program provides college preparation and work readiness training to youth
Charriy League, Inc	PO Box 471332	Charlotte, NC 28210	56-0560327	501(c)(3)	\$30,000 00			Food clothung, hygiene products & classroom educational materials for impovenshed châdren.
PediPlace	502 S Old Orchard Lane Surte 126	Lewisville, TX 75067	75-2512752	501(c)(3)	\$25,000,00			Pedature heathcare precise for ages birth through 18 years who are uninsured or Medicand or CHIP
Junior Charte League of Concord Inc	PO Box 1008	Concord, NC 28026	56-6061166	501(c)(3)	\$20,000.00			Provide new docking for disadvantaged children in Cabarrus and Kennapolis schoots
The Dale Jr Foundation	PO Box 330	Mooresville, NC 28115	20-8353637	501(c)(3)	\$18,125.00			Desicated to gaveg underprivaleged individuals with a focus on youth the secures to improve their confidence and education and the opportunity to scheeve extraodrasty goels.
Alexander Youth Network	6220 Thermal Road	Charlotte, NC 28211	56-0554413	501(c)(3)	\$17,930.00	••		Occupational/Physical therapy in Psychiatric Residential Treatment Facility
Male Leadership Academy of Charlotte	5901 Nations Ford Road	Charlotte, NC 28217	46-0733802	501(c)(3)	\$17,300 00			Fund e language ecademy teaching Spanish to grades 1-5
A Better World	4527 Freedom Drive	Charlotte, NC 28208	56-2238007	501(c)(3)	\$15,000.00			Financial resources for After School Program
Abuse Atternatives	104 Memonal Dr	Bristol, TN 37620	54-1101180	501(c)(3)	\$15,000 00			Providing emergency shelter for abused children and mothers
American Red Cross	14298 Lee Highway	Bristol, VA 24202	53-0196605	501(c)(3)	\$15,000 00			Help childran with their recovery following disasters
Assistance League of Charlotte	PO Box 471112	Charlotte, NC 28247	56-1781080	501(cX3)	\$15,000 00			Provide clothes, shoes, grooming kits and books to at-risk youth
Bovs and Girls Club of Elizabethton/Carter Co	104 Hudson Dr	Elizabethton, TN 37643	62-0502737	501(c)(3)	\$15,000.00			increase the effectiveness and the children served through the After School Program
Boys and Girls Club of Greater Kingsport	P O Box 784	Kingsport, TN 37662	62-0481370	501(c)(3)	\$15,000.00			Race 4 Success - Afterschool program
Boys and Girls Club of the Mountain Empire	P O Box 1074	Bristol, VA 24203	54-0653489	501(c)(3)	\$15,000.00			POWER Hour efter school program
Cemp CARE, Inc	4616 Noras Path RD	Charlotte, NC 28226	56-1467274	501(c)(3)	\$15,000 00			Week long summer camp to children who have or had cancer
CASA For Kids	310 Shelby Street	Kingsport, TN 37660	62-1464923	501(c)(3)	\$15,000 00			Training for court advocates for children in judicial system.
CASA of Northeast Tennessee	P O Box 1021	Johnson City, TN 37605	45-0515257	501(c)(3)	\$15,000 00			Recout, train and monitor court advocated for children
Children Exceeding Expectations School JLK	151 Speedway Blvd	Bristol, TN 37620	62-0634742	501(c)(3)	\$15,000 00			School for châdren going through cancer freetment

990 - Sch I - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

56-1331429

For the Calendar year 2016 or the tax year penod beginning 10-01 and ending 9-30-17

Speedway Children's Chartles

Children's Attention Home, inc PO B			(6)	ומיוסו אמרומו	(a) Amount of (e	(e) Amount of (f) Method non-cash of assistance valuation	f) Method (g) of Description valuation non-cash	Description of non-cash	(h) Purpose of grant or assistance
	PQ Box 2912	Rock Hill, SC 29732	57-0527092	501(c)(3)	\$15,000 00			Provide food to	Provide food to child widims of shuse, abandonment, and neglect
Common Heart, Inc	PO Box 2761	Indian Trail, NC 28079	46-1161476	501(cK3)	\$15,000 00			Purchase food	Purchase food for distribution to hungry children and families
sociation of Greater Charlotte	ad Surte 430	Charlotte, NC 28209	56-1541529	501(c)(3)	\$15,000 00		_	Cemp Program	Camp Programs to benefit individuals with Down syndrome
		Brstol, VA 24201	62-0514164	501(c)(3)	\$15,000 00			Friendly PEERs	Friendly PEERsussion drug prevention program
n CrtyWashington County		Johnson Cdy, TN 37605	62-0493392	501(c)(3)	\$15,000 00			ASTRID- Actue	ASTRID- Actueving Success Through Resources and Independent Development
	iew Parkway	Kingsport, TN 37660	58-1564232	501(c)(3)	\$15,000 00		_	Child care for s	Child care for special needs children
		Charlotte, NC 28209	52-1084075	501(c)(3)	\$15,000 00			Emergency ass	Emergency assistance for families/children with disability
un		Charlotte, NC 28204	56-1221194	501(c)(3)	\$15,000 00			Continue growth	Continue growth of gnet supportive services to 80 sites in Mecklenburg County
vs Mitey Riders, Inc	9	Waxhaw, NC 28173	56-2045099	501(cK3)	\$15,000 00			Therapeutic hor	Therspectic horseback nding program for special needs children free of charge
		Charlotte, NC 28233	58-1413074	501(c)(3)	\$15,000 00			Supports the Ba	Supports the Bee Mighty program
Center		Charlotte, NC 28203	20-1820596	501(c)(3)	\$15,000 00			Child abuse ed	Child abuse education & prevention programs free of charge.
		Johnson City, TN 37602	62-1641099	501(c)(3)	\$15,000 00			Nutrition progra	Nutricon program, Leadership training and enrichment fleid trips
arvest Food Bank of Northeast TN	IV6	Kingsport, TN 37663	62-1303822	501(c)(3)	\$15,000 00			Kids backpack program	merbord
	106 State St	Bnstol, TN 37620	62-0488044	501(c)(3)	\$15,000 00			Affordable qual	Affordable quality childcere for the less fortunate
3ig Sisters of East Tennessee	301 Louis St. Suite 302	Kingsport, TN 37660	62-0842531	501(cK3)	\$14,000 00			Community and	Community and School based mentoring
	P O Box 1505	Grundy, VA 24814	20-5517073	501(c)(3)	\$14,000 00			Power Hour after	Power Hour efferschool programming
		Bristol, VA 24201	54-2038035	501(c)(3)	\$14,000 00			Housing assists	Housing essistance for families with children
een Leadership Club	400 MLK Jr Blyd	Bristol, TN 37620	62-0521204	501(c)(3)	\$14,000 00			Provide a postr	Provide a postave environment efter school for kids
mmunity Services	21451 Sugar Hollow Road	Bristol, VA 24202	54-0979632	501(c)(3)	\$14,000 00			Courthouse dog program	unibard t
Feeding America Southwest Virginia 1025	1025 Electnc Road	Salem, VA 24153	54-1939556	501(c)(3)	\$14,000 00			Fight hunger an	Fight hunger and change lives among needy children
iter	124 Ritter Circle	McClure, VA 24269	54-1509759	501(c)(3)	\$14,000 00			Meeting Christo	Meeding Christmas needs of 600 undersorved children in their region
McDowell Drug Tesk Force 1712	1712 Orinda Drive	Petaluma, CA 94954	68-0051382	501(c)(3)	\$14,000 00			Every 15 Mmut	Every 15 Manutes - program for teens
d Hearing Center	301 Louis St. Suite 101	Kingsport, TN 37660	51-0141538	501(c)(3)	\$14,000 00			Provide speech children	Provde speech, language, swallowing and hearing treatments for infant and children
	P O Box 212	Bristol, VA 24203	31-1794923	501(c)(3)	\$14,000.00		_	Christmas for u	Christmas for underprivileged children

990 - Sch I - Part II, Continuation of Grants and Other Assislance to Governments and Organizations in the United States

56-1331429

For the Calendar year 2016, or the tax year penod beginning 10-01 and ending 9-30-17

Speedway Children's Charties

Address PO Box 867	Blounkile TN 37617	62-1232172	501(c)(3)	cash grant \$13,000 00	non-cash of assistance valuation	of Description of valuation non-cash	(r) ruppas or grant or assaument Thersey for the abused cold and the non-offending family member
	Johnson Crty, TN 37602	20-8559320		\$13,000,00			Unlessh confidence through accomplishment while establishing e lifetime apprecation of health and fitness
112 Knotling Hill Lene	Fall Branch, TN 37656	47-1332019		\$13,000,00			Hearing and loaner bank for children
	Johnson Crty, TN 37602	64-0385934	501(c)(3)	\$13,000 00			Summer Cemp Experience
	Statesville, NC 28687	56-1010615	501(c)(3)	\$12,500 00			To provide diapers and wipes to infants in need
821 Baxter Street, Suite 310	Charlotte, NC 28202	06-180739	501(c)(3)	\$12,000 00			Program connecting college students seeking practical experience in autiem families.
	Greenvile, TN 37744	62-1706248	501(c)(3)	\$12,000 00			Homework, Tutoring, & Positive (ewards
	Mornstown, TN 37816	62-0630867	501(c)(3)	\$12,000 00			Head of the Class- homework and tutoring
	Bristol, VA 24201	46-1775208	501(¢)(3)	\$12,000 00		-	Clothing and food for needy children
	Kingsport, TN 37663	56-2277775	501(c)(3)	\$12,000 00	İ		Pronde physical, emotional and basic health needs of babies and children
	Bristol, VA 24201	54-1707603	501(c)(3)	\$12,000 00			Affordable quality childcare for the less fortunate
	Johnson City, TN 37601	62-0694557	501(c)(3)	\$11,000 00			Provide respite services to children with disabilities
	Bristol, VA 24209-6852	54-2038877	501(c)(3)	\$11,000.00			Free heathcare and medications and school/aports physicals
	Mountain City, TN 37683	62-1719057	501(c)(3)	\$11,000,00			Emergency food, clothung, shelter for children of domestic violence
	Presque Isle, ME 04769	26-0250671	501(c)(3)	\$11,000 00		_	Help youth realize their full potential as productive responsible and caring crizens
	Kingsport, TN 37664	62-1603341	501(c)(3)	\$11,000,00		_	Student appropriate for special needs students
	Blountville, TN 37617	27-0052413	501(c)(3)	\$11,000 00		_	Serving needy children in county for Christmas
	Kingsport, TN 37662	82-6064042	501(c)(3)	\$10,880.00			Project Hetpang Hands so that girls get a hand up and not a hand out
601 East 5th Street, Surte 230	Charlotte, NC 28202	58-1911741	501(c)(3)	\$10,000 00	-	_	Getting children expenencing homelessness to school 6 two meels a day
6446 West Charleston Blvg	Las Vegas, NV 89146	88-0137831	501(c)(3)	\$10,000 00			Purchase new dochunglessentials for CCSD Title I HOPE Schools
2295 Renaissance Dr., Ste. D	Las Vegas, NV 89119	26 2678979	501(c)(3)	\$10,000.00		<u> </u>	Provide chothangignar to bables born into impoverished families
	Banum Springs, NC 28010	56-0529993	501(c)(3)	\$10,000 00			Connect group bornes for children living on campus with walkway
	Knowile, TN 37919	38-2842293	501(c)(3)	\$10,000 00		-	Foster care, adoption and family support
				000000			Provide summers for after action to the second summers are second to the second summers are second to the second s

- 5ch I - Part II, Continuation of Grents and Other Assistence to Governments and Organizations in the United States

56-1331429

For the Calendar year 2016 or the tax year penod beginning 10-01 and ending 9-30-17

Speedway Children's Chartles

(a) Name of organization	Address		(b) EIN	(c)IRC section	(d) Amount of (cash grant	(e) Amount of (f) Method non-cesh of assistance valuation	thod (g) Description of	(h) Purpose of grant or assessence
Boys and Girls Club of Johnson City/Weshington County	2210 West Market St	Johnson Crty, TN 37604	62-0810733	501(c)(3)	\$10,000 00			Scence, Tectmology, engineering, art and math programming
Bruce Irons Camp Fund	725 Providence Road, Suite 212	Charlotte, NC 28207	55-0825218	501(c)(3)	\$10,000 00			Fund camper canchment activities for a 5 yr camping program for low income youth
Cabarrus Cooperative Christian Ministry, Inc	PO Box 1717	Concord, NC 28026	56-1320818	501(c)(3)	\$10,000 00			Meeting familibes in crisis with food and shelter.
Cap the Gap for Foster Care	P O Box 2092	Kingsport, TN 37664	62-1546506	501(c)(3)	\$10,000 00		-	Meeting the needs of children in foster care
Catholic Chartles Diocese of Charlotte	1123 South Church Street	Charlotte, NC 28203	58-1058954	501(c)(3)	\$10,000 00			Provide nutrition not load that meet children a dietary needs
Chariotte Bilingual Preschool, Inc.	6300 Highland Avenue	Charlotte, NC 28215	36-4522499	501(c)(3)	\$10,000 00			Programs to serve children from al-risk Spanish speaking homes
Charlotte Rescue Mission	PO Box 33000	Charlotte, NC 28233	56-0571223	501(c)(3)	\$10,000 00	_	-	Music therapy program for children directly impacted by addiction
Children's Advocacy Center of the 1st Judicial District	P O Box 827	Johnson City, TN 37805	82-1765785	501(c)(3)	\$10,000 00			Provide services to child victims of physical and sexual abuse
Christmas Box of Northeast Tennessee	2100 Milibrooke Onve	Johnson City, TN 37604	62-1545469	501(c)(3)	\$10,000 00			Prowding food for low income families for Christmas
Community On The Shelterless	PO Box 2744	Petaluma, CA 84953	94-1648949	501(c)(3)	\$10,000 00			Kds First Children's Program (KFCP)
Crumley House Brain Injury Rehab Center	300 Urbana Rd	Limestone, TN 37681	58-1988511	501(c)(3)	\$10,000,00			Care and trausing for concussions and prevention
Dove House Children's Advocacy Center	PO Box 825	Statesville, NC 28687	20-0840600	501(c)(3)	\$10,000.00			Provide free of charge services for servielly abused children
East TN Christian Home and Academy	P O Box 1147	Elizabethton, TN 37644	62-0517558	501(c)(3)	\$10,000,00			Prepare guts on home with an independent itwing program for future
Esther House of Stanly County, Inc	PO Box 734	Albemarie, NC 28002	46-1652623	501(c)(3)	\$10,000 00			Provide free of charge services for sexually abused children
Florence Cirtletion Services. Inc	PO Box 36392	Charlotte, NC 28236	56-0577626	501(c)(3)	\$10,000 00			Programs and services for ait-risk pregnant adolescents
Goodle Two Shoes	10620 Southern Highlands Pkwy , #110-474	Les Vegas, NV 89141	20-8862388	501(c)(3)	\$10,000 00			Purchase 400-600 pairs of shoes that will provide critical inventory for scheduled shoe distribution events.
Holston United Methodist Home for Children	P O Box 188	Greenevile, TN 37744	62-0515531	501(c)(3)	\$10,000 00			Тъегареисс пища ргодгат
Hospice & Palliative Care Charlotte Region	1420 East Seventh Street	Charlotte, NC 28204	56-1219017	501(c)(3)	\$10,000 00			Fund home-based quality of tife care for critically III children.
Hospice of fredell County	2347 Simonton Road	Statesville, NC 28625	56-1376577	501(c)(3)	\$10,000 00			Fund program for children coping with life-threstening illness and loss
Kennek Foundation	PO Box 333	Marblehead, MA 09145	47-21425054	501(c)(3)	\$10,000 00			Assist châdren most vulnerable, going through tough times
Missionary Albletes International	1020 Crews Road, Suite N	Matthews, NC 28105	33-0017152	501(c)(3)	\$10,000 00			Soccer-based outreach to inner city youth
Redwood Empire Food Bank	3990 Brickway Boulevard	Santa Rosa, CA 95404	68-0121855	501(c)(3)	\$10,000 00			Farm to Family School Pantry (FFSP) for youth
Safe Altence	601 East 5th Street, Suite 400	Charlotte, NC 28202	56-0529967	501(e)(3)	\$10,000 00			Support for the Domestic Violence Shelter's Children's Program
Salvation Army of Cabarrus County	Post Office Box 511	Concord, NC 28026	58-0660607	501(cK3)	\$10,000 00			Support the Christmas Angel Tree

990 - Sch I - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

56-1331429

For the Calendar year 2016 or the tax year pence beginning 10-01 and ending 9-30-17

Speedway Children's Charties

(a) Name of organization	Address		(b) EIN	(c)IRC section	(d) Amount of (e	(e) Amount of (f) Method non-cash of assistance valuation		(g) Description of non-cash	(h) Purpose of grant or assistance
Salvation Army, a Georgia Corporation	4015 Stuart Andrew Blvd	Charlotte, NC 28217	58-0660607	501(c)(3)	\$ 10,000,00		 		Supports st-rsk children loving at our Center of Hope homeless shelter
Shining Hope Farms	PO Box 1036	Mount Holly, NC 28120	30-0067482	501(c)(3)	\$10,000 00			35	Supports the hypotherapy program for children with disabilities
Shoes That Fr	1420 N Claremont Bhd , Surte 204 A	Claremont, CA 91711	95-4425565	501(c)(3)	\$10,000 00			<u>.</u>	Provde athletic shoes to low-income children in New England
Southern Appalachian Ronald McDonald House	418 N State of Franklin Road	Johnson City, TN 3764	62-1578123	501(c)(3)	\$10,000 00			-5	Underwriting the actual cost of family rooms
Thampson Child & Family Focus	6600 Saint Peter's Lane	Matthews, NC 28105	58-0547460	501(c)(3)	\$10,000 00			ď	Perenting support program for high-risk families
Holy Angels, Inc	PO Box 710	Belmont, NC 28012	51-0230406	501(c)(3)	00 009'6\$			_ &	Purchase new edaptive rectiners to meet the needs of the children.
Town Square inc Food Ministres	P O Box 338	Glade Spring, VA 24340	54-1897853	501(c)(3)	00 005'6\$			Ā	Prepares food boxes for children
Assistance and Resource Ministry (ARM)	715 W C. Street	Elizabethton, TN 37643	62-1533942	501(c)(3)	00 000 6\$			_ 5	Shoes and school supplies for needy children
Bristol Emergency Food Pantry	201 Overbrook Dr	Bristol, TN 37620	62-0984494	501(c)(3)	00 000 6\$			ž	Meeting emergency food needs of families with children
Carter Co Imagination Library	2207 Eagle Dr	Elzabethton, TN 37643	43-2082197	501(c)(3)	00 000 8\$			<u>.</u>	Provide free books for children birth to 5 years
Hands On! Resignal Misseum	315 E Main Street	Johnson City, TN 37601	62-1282542	501(c)(3)	00 000'6\$			&	Providing educational programs for all children
Hope House of Scott Co	P O Box 1992	Gate Crty, VA.24251	54-1893016	501(c)(3)	00 000'6\$			Æ	Prowde needs for youth residing in their shelter
Sonoma Valley Education Foundation	PO Box 493	Sonoma, CA 95476	68-0279154	501(c)(3)	00 000'6\$			8	Soroma School Garden Project
Spread the Word Nevada	1065 American Pacific Dr., Ste. 160	Henderson, NV 89074	22-3829041	501(c)(3)	00 000'6\$			Æ	Provide new books and book bags to children attending at-risk achoots
Sulivan Co Imagnation Library	P.O. Box 3045	Kingsport, TN 37664	55-0860873	501(c)(3)	00 000'6\$			<u> </u>	Free books for children birth until 5 at no cost to family
Injury Prevention Center of NH	c/o DHMC One Medical Center Drive	Lebanon, NH 03756	02-0222111	501(c)(3)	\$8,800 00			8	Assist with preventing accidental childhood injury
United Way of Southwest Virginia	P O Box 644	Abingdon, VA 24212	54-0718860	501(c)(3)	\$8,800 00			- B	Backpack feeding program
Wings of Eagle Ranch	4800 Farth Trails	Concord, NC 28025	56-2100632	501(cK3)	\$8,438 00			E	Equine essisted therapy for teenage victims of human sex trefficking
Ada Jenkins, Families, and Careers Development Center, Inc.	PO Box 1842	Davidson, NC 28036	56-1927067	501(c)(3)	88,000 00			_ =	LEARN Works Program for the 2016-2017 school year
Appalachia Service Project	4523 Bristol Highway	Johnson Crty, TN 37601	62-0989383	501(c)(3)	\$8,000 00			×	Making children's homes safer and drier
Big Brothers Big Sisters of the North Bay	118 Second Street	San Rafael, CA 94901	94-2502278	501(c)(3)	\$8,000 00			S	Sowerns Community-Based Mentoring
Boys & Girls Clubs of Central Sonome County	1400 N Dutton Avenue Suite 14	Sante Rosa, CA 95401	68-0309534	501(c)(3)	\$8,000 00			E	The Chib (R. Juvenia Hall / REACH (Re-entry program)
Bread of Life Chidren's Ministry	30427 Old Saltworks Rd	Meadownew, VA 24361	54-2057171	501(c)(3)	\$8,000 00			å	Backpack Food Program and Christmas project
California Parenting Institute (dba Child Parent Institute)	3650 Standish Avenue	Santa Rosa, CA 95407	94-2541640	501(c)(3)	\$8,000 00				Family Basic Needs for children

990 - Sch i - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

56-1331429

For the Celendar year 2016 or the tax year period beginning 10-01 and ending 9-30-17

Speedway Children's Charties

(a) Name of organization	Address		(b) EIN	(c)IRC section	(d) Amount of cash grant	(d) Amount of (e) Amount of (f) Method cash grant non-cash of assistance valuation	thod (g) f Description of stion non-cash	(h) Purpose of grant or essitiance
Catholic Charities of the Diocese of Sania Rosa	987 Arway Court	Santa Rosa, CA 95403	94-247939	501(c)(3)	00 000 BS			BRIDGES - Cerng for Children in Crais
Center for Community Transitions	PO Box 33533	Charlotte, NC 28233	51-0185383	501(c)(3)	\$8,000 00			Program supplies and monthly family events for children with incercerated perents
Charlotte Speech and Heanng Center Inc	741 Kenilworth Avenue, Suite 100	Charlotte, NC 28204	56-0892041	501(c)(3)	00 000 8\$			Provide mass speech-language and hearing acreenings to children
Child Advocacy Center of the 3rd Judicial District	P O Box 743	Moshern, TN 37818	62-1822505	501(c)(3)	00 000 8\$			Therepeutic services for sexually abused children
Communities in Schools of Charlotte-Mecklenburg	601 east 5th Street #300	Charlotte, NC 28202	58-1661795	501(c)(3)	\$8,000 00			Increase student services to students not reading at grade level
Community Action Partnership of Sonoma County	141 Stony Circle Suite 210	Santa Rose, CA 95401	68-0176855	501(c)(3)	88,000,00			Save Our Smare - dertal program for children
Conservation Corps North Bay Inc	27 Larkspur Street	San Rafael, CA 94901	94-2831592	501(c)(3)	00 000'B\$			Ceiree Pathways Program for teens
Court Announted Special Advocates of Sonome County	PO Box 1418	Kenwood, CA 95452	68-0404770	501(c)(3)	00 000 8\$			CASA Mertaring and Gang Prevention for young people.
Dream on 3	4311 School House Commons Road	Hamsburg, NC 28075	46-1988039	501(c)(3)	00 000 B\$			Would essest in supporting one of their Dream Experiences for a future Dream Kod
Canada at the Tax	PO Box 1339	Rohnert Park, CA 94927	20-8968997	501(c)(3)	88,000,00			Fence at the Top Mentanng and Tutoring Program for children.
industrial MOM Inc. Comin Advocates for Vorth	2447 Summerfield Road	Santa Rose, CA 95405	94-1711490	501(c)(3)	00 000'8\$			SAY Youth Criss Services
HIGHTURBS NOTE, INC. COCKS NEVOCEUT OF LOCAL	0 G 800 5548	Kinasport, TN 37663	36-2193608	501(c)(3)	00 000'8\$			Children treated at the hospital at no charge to parents
dated cumiers.	17560 Green Street	Sonome, CA 95476	68-0228235	501(c)(3)	00 000'8\$			Best Start Sonoma Valley working together for youth
La Luc Cenner	6.18 dth Street #2.17	Santa Rosa, CA 95404	64-0328590	501(c)(3)	00 000'8\$			Bayer Familisprod Forward
status A Describ Makant and Description Carles	O Shirth Prove State	Novato, CA 94949	94-2747307	501(c)(3)	00 000'8\$			Support for Families of Children w/ Special Needs
Maily, A fareit termork and resources const	0840 W Sahara Ave Ste 120	Las Vecas. NV 89117	13-1665552	501(c)(3)	00 000'8\$			Fund critical volunteer screening & charter ADA-compliant wheelchair accessible transportation to our campsite in Southern California and back to Las Vegas
Muscular Dystopuly Possociation	9330 W Martin Ave 1st Floor	Las Vegas, NV 89148	20-4388240	501(c)(3)	00 000'8\$			Support after-school independence classes/tutoring programs for visually impassed châdren in community.
Nevada Billiu Ciliurens y Company	6070 C Eastern Ave. Ste 200	as Vedas NV 89119	88-0302673	501(c)(3)	00 000 8\$			Provide psychological support and tools needed to cope with life-threatening diseases and encotoral trains of threat of death.
Nevada Chighood Caricer Fugination	780 I month Avenue	Napa CA 94588	75-3149095	501(c)(3)	00 000 8\$: 		Provides comprehensive services to young people many whom are current and former foster youth
Off the move Pectating Dental Intrative of the North Coast Inc	1380 19th Hold Drive	Windsor, CA 95492	34-2012430	501(c)(3)	00 000 8\$			POI Outreech & Oral Health Education Program
Preliuma People Services Center	1500 Petaluma Bivd South	Petaluma, CA 94952	94-2271299	501(c)(3)	00 000 88			Youth Prevention & Intervention - Mental health
Ridin' High Therapeutic Horse Program	1525 Mamingside Drive	Mornstown, TN 37814	62-1752021	501(c)(3)	\$8,000 00			Sponsorship for a child to have lessons for nine months
Roseland Charter School	1934 Brwana Drive	Santa Rosa, CA 95407	43-029144	501(c)(3)	00 000 8\$			Through College Mentor Program for teens
Shepard s. Inn	P O Box 2214	Elizabethton, TN 37644	62-1690084	501(c)(3)	\$8,000 00			Emergency sheker, women and children.

990 - Sch I - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

56-1331429

For the Calendar year 2016 or the tax year penod beginning 10-01 and ending 9-30-17

Speedway Children s Charities

Sonoma Valley Mentoring Altiance 916 Sonoma Valley Teen Services 1744					Cash grant	non-cash assistance vali	of Description of	
	916 First Street West	Sonome, CA 95476	68-0429128	501(c)(3)	\$8,000 00		_	Stand By Me' Mentoring Program for youth
	17440 Sonoma Highway	Sonoma, CA 95476	68-0390028	501(c)(3)	\$8,000 00			Ready to Work program for youth
	1207 Cleveland Avenue	Santa Rosa, CA 95401	58-2675876	501(c)(3)	\$8,000,00			Mother and Child Program
Home Foundation	PO Box 11671	Santa Rosa, CA 95406	68-0343720	501(c)(3)	\$8,000 00		-	Valley of the Moon Children's Denial Program
	P O Box 548	Bnstol, TN 37621	84-0385934	501(c)(3)	\$8,000 00			Summer camp experience
hristian Association of Sonoma County	811 Third Avenue	Senta Rose, CA 95404	94-2347428	501(c)(3)	\$8,000,00			Safe House Châdren's Program
Anuva Prevention and Recovery Center 100	100 Billingsley Road	Charlotte, NC 28211	56-0746601	501(c)(3)	\$7,500 00			Adolescent Services for substance abuse
Big Brothers Big Sisters of Greater Charlotte 380	3801 E Independence Blvd Surte 101	Charlotte, NC 28205	56-0577630	501(c)(3)	\$7,500 00			Support one to one meritoring relationships for adult Bigs and advisk Littles
Bristol Outreach 412	412 Glenway Avenue	Bristol, VA 24201	27-0259050	501(c)(3)	\$7,500 00			Summer fun with positive guidance
r Childhood Cancer of Nevada	8990 Spanish Ridge Ave , Ste 100	Las Vegas, NV 89148	94-2579116	501(c)(3)	\$7,500 00			Provide crucial financial assistance for travel out of stote for specialized core
	2116 Wilkinson Blvd	Charlotte, NC 28208	03-0455618	501(cH3)	87,500 00			Pronde free school supplies to children living in poverty
of Gaston County	700 Robinson Road	Gastonia, NC 28058	56-1499208	501(c)(3)	\$7,500 00			Provide car seats and pack and plays for indigent children of Gaston County.
	10 Cleveland St	Locust Grove, GA 30248	23-7201676	501(c)(3)	\$7,500 00			Programs for children with special needs
	303 Meed Tech Perkway Surte 330	Johnson Crty, TN 37604	62-0476282	501(c)(3)	\$7,500 00	-	_	Enhancing patients rooms
9	932 C Street	Noveto, CA 94949	94-3024246	501(cK3)	00 005'2\$			Gerden of Eagar Health and Nutrition Program
	PO Box 550 (Stowe Street)	Waterbury, VT 05676	46-3939471	501(c)(3)	\$7,500.00			Summer Liseracy Program from children Pre-K - 6in grade
	300 Sunny Hills Drive	San Anselmo, CA 94960	94-1156301	501(c)(3)	\$7,500 00			You Three Geng Prevention and Intervention Program for youth
	1 West Owens Ave	N Las Vegas NV 89030	88-0253276	501(c)(3)	\$7,500 00			Support homeless and abused children by offering educational and therapeutic programs.
Charitable Foundation	4 Elliot Way, Surte 301	Manchester, NH 03103	02-0512229	501(c)(3)	\$7,378 00		_	Spot Vision Screener for pediating care offices
	511 N Akerd St, Suite 302	Dallas, TX 75201	75-2332948	501(c)(3)	\$7,163.68		_	Weekend beckpack project, food for children from low incomes over the weekend
Denton Kwanis Children s Clinic	1308 Crescent St Suite C	Denton, TX 76201	75-6036230	501(c)(3)	\$7,163.68			Free services for children in need of medical and dental treatment
	821 N. Mojaye Rd	Les Vegas, NV 89109	47-0376606	501(c)(3)	\$7,000 00			Create memorable holiday season for children
and Hearing	2603 Osborned St	Bristol, VA 24201	62-0556300	501(c)(3)	\$7,000 00		_	Provide therapy to all children in need
Gelletin County, Inc	50 Paw Pnnt Path	Warsaw, KY 41095	45-2394650	501(cK3)	\$7,000 00		_	Emergency assistance for economically disadvantaged children

990 - Sch I - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

56-1331428

For the Calendar year 2016 or the tax year penod beginning 10-01 and ending 9-30-17

Speedway Children's Charties

(h) Purpose of grant or assistence	Dental program for lods	Provide holiday meats/gifts to 175 senior citizens who are raising their grandchadren.	Breakfast, hot hunch and a nutritious snack each school day to 64 low income children	Provides mental health services for low-income youth	Specialized equipment for the school	Provide aramediate needs thems respite from the streets and supportive services to homeless youth at NPHY's Drop-in Center	Ensuring all children are reading on grade level	Meeting the needs of youth with disabilities	Sets, effortable and caring home for families in crass by providing food and shelter	Working with Special needs children,	Prowde expectant perents with infant-to-toddier car septs	Sending pediatric cancer patients and their families to Walt Disney World	Creates e Bundle of new and used newbom essentials to fragile femilies	Christmas for underprivileged children	Cemp Sponsorshyp for children with life threatening linesses	Assist in alternating hunger in greater Concord Area.	Provide emergency necessities for children transitioning homes	Provide ceramic classes to impoverished children at food punity sites	Provide visual art and music classes to community centers and shelters	Financial assistance for those who need it to participate in the Scouling program	Provide emergency relief for families living with cystic fibrosis	Food programs for children and Back to School Education program	Free books for children birth until 5 at no cost to family	Provde tood for less fortunate families
(g) Description of non-cash																								
(f) Method of valuation																								
(e) Amount of non-cash assistance																								
(d) Amount of cash grant	\$7,000 00	\$7,000 00	\$7,000 00	\$7,000 00	\$7,000 00	\$7,000 00	87,000 00	\$7,000 00	\$7,000 00	\$7,000 00	\$6,675.00	\$6,202.05	\$6,000 00	\$6,000 00	00 000'9\$	\$6,000 00	00 000 9\$	00 000'8\$	s6,000 g	\$6,000 00	00 000 9\$	00 000'9\$	\$6,000 00	00 000'9\$
(c)IRC section	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(cK3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(cK3)	501(c)(3)	501(c)(3)	501(5)(3)	501(c)(3)	501(c)(3)	501(c)(3)
(b) EIN	78-001847	88-0395530	58-166833	68-0375462	54-1053329	88-0476452	20-5005906	62-1542726	20-4671570	84-0385934	88-0108496	75-1890339	27-3384164	20-3699851	22-2582877	22-2490055	58-2247802	90-0198258	59-1356847	58-0574922	45-2683114	62-1233320	35-2300989	54-0792814
	Bristol, TN 37620	N Les Veges, NV 89032	Charlotte, NC 28205	Santa Rosa, CA 95404	Bristol, VA 24201	Las Vegas, NV 89119	Bristol, TN 37620	Bristol, TN 37620	Charlotte, NC 28207	Kingsport, TN 37664	Las Vegas, NV 89119	Fort Worth, TX 76107	Charlotte, NC 28220	Grundy, VA 21614	Casco, ME 04015	Concord, NH 03301	Elizabethton, TN 74644	Charlotte, NC 28205	Charlotte, NC 28202	Griffin, GA 30224	Charlotte, NC 28213	Johnson City, TN 37605	Abıngdon, VA 24 <u>2</u> 12	Jonesville, VA 24263
Address	245 Midway Medical Park	3840 N Str Ste 130	3241 Sem Drenan Road	1200 College Avenue	200 N Pinecrest Lane	4981 Shirley Street	1236 Volunteer Parkway	10 6th Street	1813 E Morehead Street	P O Box 3374	1640 E Flamingo Rd , Ste #100	3751 West Freeway	PO Box 12303	3174 Slate Creek Road	35 Acadis Road	c/o Susan Leahy, 11 South Main Street, Suite 500	Р О Вох 604	4506 Monroe Road	345 N College Street	P O Box 173	1700 University Commercial Place	P O Box 2441	P.O. Box 2511	P O Box 280
(a) Name of organization	Healing Hands Health Center	ode of North Lee Venas		ountv		in for Homeless Youth		oor Adventure Center			par			Buchanan County Coal Mines, Christmas 7 Southern Youth in Action 13174 State Creek Road	Cemp Sunshine at Sebago Lake, Inc.			,	tool of the Arts	10			shington Co and Bristol VA	ntry #300

990 - Sch I - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States.

56-1331429

For the Celendar year 2016 or the tax year penod beginning 10-01 and ending 9-30-17

Speedway Children's Charties

(h) Purpose of grent or assistance	Year-Roand After-School Homework Support Program for at risk children	Week long bereavement camp for children who have lost someone close to them	Roce's Young Mather's Program	Purchase erough food to fill 2000 bags of food during 2016-2017 school year	Assistance for needy children at Christmas	Support programs that positively enrich the lives of children throughout the United States	Al-Terram Wheekthar Purchase	Provide essential tools for less fortunate children throughout the country	Program for high school students with autism and their parents	The 2017 Baskethall Clinic will afford 150 children with Autlam or other developmental disabilities a day of play	Promote faness to school across North Texas	Provde support and financial assistance to organizations helping others live healther, happer lives
9 6	Year-Roun	Week long	Roce's You	Purchase	Assistance	Support pri	All-Terram	Provide es:	Program to	The 2017 E developme	Promode fits	Provide sur healther, h
od (g) Description of	_	_		_								\dashv
(e) Amount of (f) Method non-cash of assessioned	\dashv	_	-									-
	8	8	00	8	8		00	00	00	00	85	8
(d) Amount of cash grant	86,000 00	\$6,000 00	\$6,000 00	00 000 9\$	\$6,000 00	\$5,925 00	\$5,800.00	\$5,525 00	\$5,410.00	\$5,400.00	\$5,384.82	\$5,300 00
(c)IRC section	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(cK3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)
(b) EIN	45-5097492	88-0197147	22-3223641	30-0396918	54-1778277	27-2014610	02-0437506	20-5950643	23-7087887	20-0362127	75-2198418	58-1907256
	Charlotte, NC 28247	Les Vegas, NV 89119	Chelsea, MA 02150	Las Vegas, NV 89115	Abingdon, VA 24212	Kernersville, NC 27284	Durham, NH 03824	Mooresville, NC 28115	Raleigh, NC 27605	Henderson, NV 89014	Fort Worth, TX 76110	Dawsonville, GA 30534
Address	PO Box 471534	4141 Swenson Street	101 Park Street	4190 N Pecas Rd	P O Box 54	703 Park Lawn Court	4 Library Way	351 Mazeppa Road	505 Oberin Road	874 American Pacific Dr	PO Box 11565	PO Box 1848
(a) Name of organization	Learning Help Centers of Charlotte	Nathan Adelson Hospice Foundation	Roca, Inc	Three Square	Washindron County Friends of Sante	Kevn Harvick Foundation	re Northeast Passage		Autrem Society of North Carolina, Inc	Tourn Inneretty Navaria	Cowtown Marethon Inc	

Grants \$5 000 or less Total Grants

Schedule I (Form 990) (2016) SPEEDWAY CHILDREN'S CHARITIES

[Parkling] Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-					
2					
8					
4					
r.					
Q					
7					
	1 - 11	1 - 0			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1

Parelly Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

Speedway Children's Charities monitors the use of grant funds through various site visits and grant evaluation forms, which are completed by the grant recipient.

Pt I Line 2

BAA

Schedule I (Form 990) (2016)

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2016

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

SPEEDWAY CHILDREN'S CHARITIES

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

Employer identification number

56-1331429

<u>r</u> ,ar	ti製 Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	(d) od of de contrib	etermini ution an	ng nounts
1	Art — Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded							
10	Securities — Closely held stock	***						
11	Securities - Partnership, LLC, or trust interests.							
12	Securities - Miscellaneous							
13								
4.4	Qualified conservation contribution — Other			 	 			
14	Real estate – Residential	<u></u>			-			
15	Real estate — Commercial				-		<u> </u>	
16	Real estate — Other	i						
17	Collectibles							
18								
19	Food inventory				-			
20	Drugs and medical supplies				ļ			
21	Taxidermy			1				
22	Historical artifacts			<u> </u>	ļ			
23	Scientific specimens				ļ			
24	Archeological artifacts		· · ·	-	ļ			
25	Other ► (Auction Items) ·	X	1,039		1			
26	Other (Food & Beverage) ·	X	52	66,863.				
27	Other Prizes	X	173	83,825.				
28		X	1 44		Cost			
29	Number of Forms 8283 received by the organization	during the t	ax year for contributions	for which the				
	organization completed Form 8283, Part IV, Donee	Acknowledge	ement		29			
						::AMERIES	Yes	No
30a	During the year, did the organization receive by cont it must hold for at least three years from the date of for exempt purposes for the entire holding period?.	the initial coi	ntribution, and which isn'	t required to be used		30 a		X
r	If 'Yes,' describe the arrangement in Part II					$\overline{}$		
	Does the organization have a gift acceptance policy	that requires	s the review of any nonst	andard contributions?.			THE POLE CO.	X
	Does the organization hire or use third parties or relationations?	ated organiza	ations to solicit, process,	or sell				
ŀ	If 'Yes,' describe in Part II					32 a		X
	If the organization didn't report an amount in column describe in Part II	(c) for a typ	e of property for which c	olumn (a) is checked,				

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2016)

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Pt I col(b)

Number represents the number of contributions, not the number of items contributed.

BAA

TEEA4602 08/24/16 Schedule N

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2016 Open to Public Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

SPEEDWAY CHILDREN	'S CHARITIES	56-1331429
Pt VI, Line 2	Board Members O. Bruton Smith and Marcus Smith relationship	have a father-son
	Committee meetings are not documented in minute recommendations to the Board for approval. Board	
Pt VI, Line 8b	documented.	
	The 990 is reviewed by the National Board of Di	rectors, Finance
Pt VI, Line 11b	Committee and Audit Committee prior to filing.	
	The Conflict of Interest Policy is distributed	<u> </u>
	Members, Key Employees and Officers to sign. I	
	is disclosed, it is reviewed by the Board and vo	
	conflict of interest exists. The individual ha	
	explain the alleged failure. If the Board dete	ermines a conflict of
Pt VI, Line 12c	interest exists, corrective action is taken.	
	Governing documents, conflict of interest police	-
	statements are made available to the public upor	_
	be mailed or emailed to person requesting docum	ment. Documents are also
Pt VII, Col (E)	available online at speedwaycharities.org.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

Open to Public

Employer identification number 56-1331429 Part 1:4 Identification of Disregarded Entities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. SPEEDWAY CHILDREN'S CHARITIES Name of the organization

(g) Sec 512(b)(13) controlled entity? Schedule R (Form 990) 2016 £ (f)
Direct controlling
entity Yes Part II. Identification of Related Tax-Exempt Organizations. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year (f) Direct controlling entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section TEEA5001 09/09/16 (c)
Legal domicile (state or foreign country) (c)
Legal domicile (state or foreign country) (b) Primary activity (b) Primary activity BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN (if applicable) of disregarded entity (a)Name, address, and EIN of related organization İ Ξ_{i}^{l} **⊘**¦ 2 <u>ල</u> **£** ୍ଟ |

Schedule R (Form 990) 2016 SPEEDWAY CHILDREN'S CHARITIES

Bartnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34

Bartling Identification of Related Organizations Taxable as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(a) (b) (c) (d) (e) (f) (f) (f) (ess, and EIN of Primary activity domicile controlling (related, unrelated, uncerted (state or entity come excluded from lax foreign foreign	(c) (d) Legal Direct domicile controlling (state or entity	(e) Predominant income (related, unrelated, excluded from tax excluded from tax under sections	tcome Share of total aled, income income on lax	total Sha	Share of Disp end-of-year to alloc	Disproportionate am allocations? 20 c	Code V-UBI amount in box 20 of Schedule K-1 (Form	General or managing partner?	or Percentage 9 ownership	ntage rship
	. 0	country)	512-514)			Yes	ο <mark>ν</mark>	1065)	Yes	No	
(1)					·						
	-									_	
(2)											
1 1 1 1 1 1 1 1 1		_		_							
			_								
(3)											
										-	
Pa武队 Identification of line 34 because	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization line 34 because it had one or more related organizations treated as a corporation or trust during the tax year	zations Taxable related organiza		a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, ins treated as a corporation or trust during the tax year	mplete if the o or trust during	rganization an the tax year	swered 'Y	es' on For	m 990, Pe	art I∕,	
(a) Name, address, and EIN of related organization	of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling	(e) Type of entity (C corp, S corp,	(f) Share of total income	Share o	(g) Share of end-of- year assets	(h) Percentage ownership	Sec 512(b)(13) controlled entity?	(13) ntity?
			country)	entity	or trust)					Yes	٤
(1) Speedway_Motorsports 51-0363307	rsports, Inc Parkway_South	Motorsports				K 72		4 N	4/2		>
rd, NC 2	7	Promoter	DE	N/A	U	W/W	-	=		+	< │
(2)											1
		· · ·								_	
		-									
(3)											
				_				_			
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56-1331429

Schedule R (Form 990) 2016 SPEEDWAY CHILDREN'S CHARITIES

Part V Transactions With Related Organizations. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	s No	
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	e related organizations	listed in Parts II-IV?				a	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				-		×	
b Gift, grant, or capital contribution to related organization(s)				- 1	٥	×	ı
c Gift, grant, or capital contribution from related organization(s)				1	×		1
d Loans or loan guarantees to or for related organization(s)				-	_	×	ı
e Loans or loan guarantees by related organization(s)				. 1e	0	×	1 (
f Dividends from related organization(s)				-		×	
				-		×	1
						×	1
				=	-	×	ι '
j Lease of facilities, equipment, or other assets to related organization(s)				=	<u> </u>	×	
k Lease of facilities, equipment, or other assets from related organization(s)				*	Y	×	1
I Performance of services or membership or fundraising solicitations for related organization(s)				= :	_	×	
m Performance of services or membership or fundraising solicitations by related organization(s)				1m	E	×)
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1 u	X		
o Sharing of paid employees with related organization(s)				10	X		
p Reimbursement paid to related organization(s) for expenses				1p	× a	_	- 1
q Reimbursement paid by related organization(s) for expenses				19		×	
r Other transfer of cash or property to related organization(s)				-	\dashv	×	
S					<u></u>	×	- 1
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	this line, including cover	red relationships and tra	nsaction thresholds				
(a) Name of related organization		(b) Transaction	(c) Amount involved	(d) Method of determining	(d) f deter	mining	
		type (a-s)		amonu	it invol	ved	М
(1)							
(2)							
(3)				:			
(4)							
(5)							
(9)							
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56-1331429

Schedule R (Form 990) 2016 SPEEDWAY CHIL!

[ParkVIII] Unrelated Organizations Taxable as a Partnership. Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) (b) (c) Name, address, and EIN of entity (state or foreign (state or foreign (c) (c)	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Predominant income	(e) Are all partners Section 501(c)(3)	(f) Share of total income	(g) Share of end-of-year	(h) Disproportionate	Code V-UBI amount in box	(j) General or managing	(k) Percentage g ownership
		(femos)	lated, excluded from tax under		ç.					
			sections 512-514)	Yes No			Yes No	1 1	Yes No	
(1)				_		-				
(2)										
(3)				-						
										_
(4)										
									· ·	
1 1 1 1 1 1 1 1 1 1 1 1										
; 1 1 1 1 1 1 1 1										
(8)										
									_	
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